



**ENROLLMENT FORM
CERTIFICATION STUDIES IN MINISTRY CAREERS**

The United Methodist Church

Please print or type

Send a copy of this form to your Conference Board of Ordained Ministry, Division of Deacons; send a copy to the Education Team/Deacons and Diaconal Ministries, P. O. Box 340007, Nashville, TN 37203-0007; and keep a copy for your personal records. Certification is available to lay, consecrated, or ordained persons.

Name _____

Address _____

City/State/Zip _____

Telephone: Home _____ Office _____

Fax _____ E-mail _____

Gender: Male Female Date of Birth _____

Racial ethnic group (for statistical purposes): African American Asian American Caucasian
Hispanic American Native American Pacific Islander

Annual Conference _____ Jurisdiction _____

I am a member of a United Methodist Church? Yes No

Name of United Methodist Church _____

I have been a member of a United Methodist Church for one year or more? Yes No

Academic Record:

High School _____

Place Date

College _____

Place Date Degree or Credit Hours

Graduate School _____

Place Date Degree or Credit Hours

Seminary _____

Place Date Degree or Credit Hours

It is my intention to apply for certification in Camp/Retreat Christian Education
 Evangelism Music Ministry Older Adult Spiritual Formation Youth Ministry

Ministry Status:

Ordained Elder Candidate for Elders Orders Lay Person
 Ordained Deacon Candidate for Deacons Orders Diaconal Minister

Date _____ Signed _____